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October 11, 2005

Jack Schweigert, Esq.
A Professional Law Corporation
550 Halekauwila Street, Room 309
Honolulu, Hawaii 96813

Dear Mr. Schweigert:

RE: REPORT ON OFELIA COLOYAN

STATEMENT OF THE PROBLEM:

Mrs. Coloyan is a 54-year old Filipino woman who had her home searched against her will on June 3, 2003. As a result she suffered severe emotional distress. She was given a psychiatric examination by Dr. Eliashof and this report is a review of that examination with rebuttal commentary.

In the report, he documents the fact that she is a hard-working, honest, mother of four, who reports that a number of police officers intimidated her, frightened her, and illegally searched her premises without permission. There is nothing in the narrative that he describes that is inconsistent with an honest representation of her recollection of the events. Her description of being upset, embarrassed, especially when the neighbors were questioned, and the development of stress related symptoms after the event is clear. There was no past or family history of psychiatric disorder or vulnerability. There is no evidence that she was magnifying, in any way, her symptoms of distress.

Psychological testing indicates that she was not trying to fake bad, or in any way act as a malingerer. An MMPI profile suggests that she views her adjustment as adequate.

In his review of records, the records of her primary physician, Dr. Steven Lum, clearly annotates her reaction to the intrusion. She was unable to sleep, was nervous, anxious, required medication and took some time off of work.

For some unexplained reason, almost twenty pages of verbatim question and answer deposition transcripts were recorded.

EXHIBIT C

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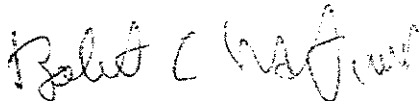
In his summary, he states that she experienced a period of emotional distress, which cleared after three weeks with no psychiatric treatment. However, the emotional distress in terms of her concerns seems to linger on. In his diagnostic formulation he gives her a primary psychiatric diagnosis of Adjustment Disorder with Mixed Anxiety and Depressed Mood. This psychiatric condition is defined as, "Development of emotional behavioral symptoms in response to identifiable stressors occurring within three months of the onset of the stressors." Therefore, I don't have any difficulty with that diagnosis. There are two sub-categories. One is acute, that is if the disturbance lasts less than 6 months, and chronic if the disturbance last 6 months or longer. He goes on to suggest that on Axis 4, which is psychosocial stressors, that a concern about the son being involved in drugs and possibly arrested was relevant. Needless to say, this concern was generated by the police, and not necessarily by the reality of her son's situation.

In his discussion he states that, in response to this incident, it is clear that Ms. Coloyon became emotionally disturbed. She was anxious, depressed, had insomnia, and could not concentrate. She had trouble eating and was so distracted she was unable to work. I have no quarrel with that. He also says the secondary disturbing issue was the embarrassment with the neighbors. He also suggested the duration was two to three weeks. This is a condition that may turn on suddenly as the result of a stressor, but this doesn't necessarily disappear, like turning off a light switch. The pain of it lingers on. So I would disagree with the implied duration.

Therefore, I am in agreement with Dr. Eliashof's conclusion that this woman suffered severe emotional distress as a result of this incident. This distress resulted in impairment. The impairment for the acute phase may have lasted three to four weeks, and some residuals can linger on for as long as six months, assuming she is not super sensitized to being exposed to police officers and other factors reminding her of the incident.

If you have any further questions, please let me know.

Sincerely,



ROBERT C. MARVIT, M.D.

RCM:djc

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